FORM D

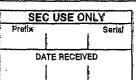
SEC 1972 (6-02)

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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'	OMB APPROVAL	
	OMB Number: 3235	-0076
	Expires:	
	Estimated average burde	en:
j	hours per response	16.00



1 of 9

Name of Offering (check if this is an amendment and name has changed, and indicate change.) Series A Convertible Preferred Stock	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: Amendment	□ ULOE
A. BASIC IDENTIFICATION DATA	06026477
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
INSTRUCTURE, INC. d/b/a Realtime Enterprises	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
111 Highland Drive, Cortland Manor, NY 10567 Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	(914) 734-1768 Telephone Number (Including Area Code)
Brief Description of Business	
Travel services	PROCESSED
Type of Business Organization corporation limited partnership, already formed other (pl business trust limited partnership, to be formed	lease specify): MAR 1 0 2006
Month Year Actual or Estimated Date of Incorporation or Organization: OTT OT	
GENERAL INSTRUCTIONS Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D of 17d(6).	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given be which it is due, on the date it was mailed by United States registered or certified mail to that address.	
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20	549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manuall photocopies of the manually signed copy or bear typed or printed signatures.	y signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only repo thereto, the information requested in Part C, and any material changes from the information previously supplement be filed with the SEC.	
Filing Fee: There is no federal filing fee.	•
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for s ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the sare to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for accompany this form. This notice shall be filed in the appropriate states in accordance with state law, this notice and must be completed.	Securities Administrator in each state where sales r the exemption, a fee in the proper amount shall
Failure to file notice in the appropriate states will not result in a loss of the federal e appropriate federal notice will not result in a loss of an available state exemption unit filing of a federal notice.	xemption. Conversely, failure to file the east such exemption is predictated on the

Persons who respond to the collection of information contained in this form are not

required to respond unless the form displays a currently valid OMB control number.

A system of the state of the st									
2. Enter the information requested for the following:									
• Each promoter of the issuer, if the issuer has been organized within the past five years;									
Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10	• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer.								
Each executive officer and director of corporate issuers and of corporate general and managing	g partners of partne	ership issuers; and							
 Each general and managing partner of partnership issuers. 									
Check Box(es) that Apply: 🛛 Promoter 🙀 Beneficial Owner 🖫 Executive Officer	Director	General and/or							
Robert Kost		Managing Partner							
Full Name (Last name first, if individual)	· _ · · · · · · · · · · · · · · · · · ·								
111 Highland Drive, Cortland Manor, NY 10567									
Business or Residence Address (Number and Street, City, State, Zip Code)									
Check Box(es) that Apply: 🔀 Promoter 🙀 Beneficial Owner 🙀 Executive Officer 🔀	Director 🛅	General and/or							
Sam Meo		Managing Partner							
Full Name (Last name first, if individual)									
111 Highland Drive, Cortland Manor, NY 10567									
Business or Residence Address (Number and Street, City, State, Zip Code)									
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or							
		Managing Partner							
Full Name (Last name first, if individual)									
Bursiness or Residence Address (Number and Street, City, State, Zip Code)									
	3 5								
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner							
Full Name (Last name first, if individual)									
run vame (Last name mst, if individual)									
Business or Residence Address (Number and Street, City, State, Zip Code)									
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Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or							
		Managing Partner							
Full Name (Last name first, if individual)									
Business or Residence Address (Number and Street, City, State, Zip Code)									
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director [General and/or							
		Managing Partner							
Full Name (Last name first, if individual)									
Business or Residence Address (Number and Street, City, State, Zip Code)									
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer] Director [General and/or							
		Managing Partner							
Full Name (Last name first, if individual)									
Business or Residence Address (Number and Street, City, State, Zip Code)									

					· Te just	i@iharajiji	N. WHOLL	South Edition.					
	· <u>-</u>											Yes	No
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?												
				Answ	er also in	Appendix,	Column 2,	if filing u	nder ULO	Е.			
2.	What is the minimum investment that will be accepted from any individual?									\$ <u>5,0</u>	00		
												Yes	No
3.	Does the	offering p	ermit joint	ownership	of a single	e unit?	•••••			•••••		Ø	
4.			on requeste										
	commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state												
or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such													
			you may se		informatio	n for that b	oroker or d	ealer only.					
Ful	l Name (L	ast'name f	irst, if indiv	vidual)									
			rtner										
Bus			Address (No			•	•						
Nar			Avenue		v York	, NY 1	0011						
Ivai	ne or Asse	ociated Die	kei oi bea	101									
Stat	tes in Whi	ch Person	Listed Has	Solicited	or Intends	to Solicit P	urchasers						
	(Check "	All States'	or check i	ndividual	States)							□ All	States
	`				,								
	AL	AK		AR	CA	CO		DE	9 C		GA	HI	ID
		IN	IA	KS	KY	LA	ME	MD	MA.	MI	MN	MS	МО
	MT	NE	NV	NH		NM	N.C.	> <	ND	OH	OK	OR	
	RI	SC	SD	TN	TX	ŪT	VT	VA	WA	WV	WI	WY	PR
Ful	l Name (L	ast name f	irst, if indi	vidual)								·	
			•	,									
Bus	siness or	Residence	Address (N	lumber and	d Street, C	ity, State, Z	Lip Code)						
==													
Nai	me of Ass	ociated Bro	oker or Dea	nier									
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit I	urchasers						
			or check										States
	(□	
	AL	AK	ΑZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Ful	ll Name (I	ast name i	īrst, if indi	vidual)			· · · · · · · · · · · · · · · · · · ·						
_													
Bu	siness or	Residence	Address (N	Number an	d Street, C	ity, State, 2	Zip Code)						
						 							
Na	me of Ass	ociated Br	oker or Dea	aler									
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
							- A1	1 (4-4-0					
(Check "All States" or check individual States)								l States					
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	IN	IA	KS	\overline{KY}	LA	ME	MD	MA	MI	MN	MS	MO
MT NE NV NH NJ NM NY NC ND OH OK								OR	PA				
	RI	SC	SD	TN	TX	UT	VT	VA	\overline{WA}	\overline{WV}	WI	$\overline{\mathbf{W}}\mathbf{Y}$	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity		
	☐ Common 🙀 Preferred		
	Convertible Securities (including warrants)	\$	\$850,000
	Partnership Interests	\$	\$
	Other (Specify)		
	Total		
	Answer also in Appendix, Column 3, if filing under ULOE.	-	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	•	Aggregate Dollar Amount of Purchases
	Accredited Investors	2.2	\$850,000
	Non-accredited Investors		- *
	Total (for filings under Rule 504 only)		
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	·	\$
	Regulation A	·	\$
	Rule 504	·	\$
	Total		\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of th securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	r .	
	Transfer Agent's Fees	[] \$
	Printing and Engraving Costs	[_
	Legal Fees		\$ 25,000
	Accounting Fees	· ·	
	Engineering Fees	[
	Sales Commissions (specify finders' fees separately)	•	
	Other Expenses (identify) Finder fees	,	\$ 51,000
	Total	ſ	76,000

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	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		\$ 774,000
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.		
		Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		
	Purchase of real estate	_	
	Purchase, rental or leasing and installation of machinery		_
	and equipment		
	Construction or leasing of plant buildings and facilities]\$	\$
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	7 ¢	пε
	Repayment of indebtedness	_	_
	Working capital		
	Other (specify):		□\$
] \$	
	Column Totals	x \$200,000	X\$574,000
	Total Payments Listed (column totals added)	\$ 7	74,000
	- Fig. 1. All and the second of the second o		
sig	ne issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice gnature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commie information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of	ssion, upon writte	
Is	suer (Print or Type) Signature	Date	
	Instructure, Inc.	January	3. 2005
	ame of Signer (Print or Type) Title of Signer		
1	Robert Kost Chief Executive Officer		

- ATTENTION -

intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)